2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# H46643

Entity Name: DYNAMIC DATA CORPORATION

FILED Apr 30, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9438 US HWY. 19 NORTH

EMBASSY PLAZA, PMB 305

PORT RICHEY, FL 34668 US

9438 US HIGHWAY 19 NORTH

EMBASSY PLAZA # 305

PORT RICHEY, FL 34668 US

Current Mailing Address: New Mailing Address:

9438 US HWY. 19 NORTH 5114 DRURY COURT

EMBASSY PLAZA, PMB 305 NEW PORT RICHEY, FL 34653 US PORT RICHEY, FL 34668 US

FEI Number: 59-2629361 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DESMOND, ROBERT
9438 US HWY 19 NORTH
5114 DRURY COURT
EMBASSY PLAZA- PMB 305
PORT RICHEY, FL 34668 US
DESMOND, ROBERT
5114 DRURY COURT
NEW PORT RICHEY, FL 34653 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ROBERT DESMOND 04/30/2002

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSC () Delete Title: PTSC (X) Change () Addition

 Name:
 DESMOND, ROBERT
 Name:
 DESMOND, ROBERT

 Address:
 9438 US HWY 19 N- PMB 305
 Address:
 5114 DRURY COURT

City-St-Zip: PORT RICHEY, FL 34668 City-St-Zip: NEW PORT RICHEY, FL 34653 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT DESMOND P 04/30/2002